

Rec'd PCT/PTO 11 MAR 2005

PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number
Effective December 8, 2004					10/532050
CLAIMS AS FILED - PART I					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY
(Column 1)		(Column 2)			
U.S. NATIONAL STAGE FEES					
BASIC FEE		SMALL ENT. = \$ 150	LARGE ENT. = \$ 300	RATE <input type="checkbox"/> FEE	
EXAMINATION FEE		Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200	BASIC FEE <input type="checkbox"/>	
SEARCH FEE		U.S. & ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500	EXAM. FEE <input type="checkbox"/>	
FEE FOR EXTRA SPEC. PGS.		minus 100 =	/ 50 =	SEARCH FEE <input type="checkbox"/>	
TOTAL CHARGEABLE CLAIMS		19 minus 20 =	.	X \$ 125 = <input type="checkbox"/>	
INDEPENDENT CLAIMS		3 minus 3 =	.	X \$ 25 = <input type="checkbox"/>	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>				X \$ 100 = <input type="checkbox"/>	
				+ \$ 180 = <input type="checkbox"/>	
				TOTAL <input type="checkbox"/>	
* If the difference in column 1 is less than zero, enter "0" in column 2					
CLAIMS AS AMENDED - PART II					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY
(Column 1)		(Column 2)		(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDITIONAL FEE
	Total	• 19	Minus	•• 20	= <input type="checkbox"/>
Independent	• 3	Minus	••• 3	= <input type="checkbox"/>	X \$ 25 = <input type="checkbox"/>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				X \$ 100 = <input type="checkbox"/>
(03/11/05)				+ \$ 180 = <input type="checkbox"/>	TOTAL ADDIT. FEE <input type="checkbox"/>
AMENDMENT B					
(Column 1)		(Column 2)		(Column 3)	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDITIONAL FEE
	Total	•	Minus	••	=
Independent	•	Minus	•••	=	X \$ 25 = <input type="checkbox"/>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				X \$ 100 = <input type="checkbox"/>
				+ \$ 180 = <input type="checkbox"/>	TOTAL ADDIT. FEE <input type="checkbox"/>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. •• If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". ••• If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.					